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PTO/SR/01 (10-01)  
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| <b>DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION</b><br>(37 CFR 1.63)<br><br><input type="checkbox"/> Declaration Submitted With Initial Filing      OR <input checked="" type="checkbox"/> Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required) | <b>Attorney Docket Number</b> | 2036-003-03    |
|  | <b>First Named Inventor</b>   | Matthew Kroeze |
|  | <b>COMPLETE IF KNOWN</b>      |                |
|  | <b>Application Number</b>     | 10/063,476     |
|  | <b>Filing Date</b>            | 26 April 2002  |
|  | <b>Group Art Unit</b>         | 3727           |
|  | <b>Examiner Name</b>          |                |

**As a below named inventor, I hereby declare that:**

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am the original and first inventor of the subject matter which is claimed and for which a patent is sought on the invention entitled:

**MULTIPLE USE BOX WITH SECURITY FEATURE AND METHODS FOR USING THE SAME**

the specification of which (Title of the Invention)

☐ is attached hereto

OR

☒ was filed on (MM/DD/YYYY) 04/26/2002 as United States Application Number or PCT International

Application Number 10/063,476 and was amended on (MM/DD/YYYY)  (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims as amended specifically referred to above.


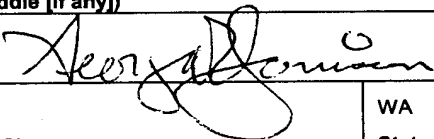
I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or of any PCT international application having a filing date before that of the application on which priority is claimed.

| Prior Foreign Application Number(s) | Country | Foreign Filing Date (MM/DD/YYYY) Country | Priority Not Claimed     | Certified Copy Attached? |                          |
|-------------------------------------|---------|--|--------------------------|--------------------------|--------------------------|
|                                     |         |  |                          | YES                      | NO                       |
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☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

## DECLARATION — Utility or Design Patent Application

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| <small>I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.</small> |  |  |  |             |   |
| NAME OF SOLE OR FIRST INVENTOR:  |  |  | <input type="checkbox"/> A petition has been filed for this unsigned inventor      |             |   |
| Given Name<br>(first and middle [if any])  |  |  | Family Name<br>or Surname  |             |   |
| George D.  |  |  | Jamison  |             |   |
| Inventor's<br>Signature  |  |  | Date   |             |   |
|    |  |  | 7/9/02   |             |   |
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| NAME OF SECOND INVENTOR:   |  |  | <input type="checkbox"/> A petition has been filed for this unsigned inventor      |             |   |
| Given Name<br>(first and middle [if any])  |  |  | Family Name<br>or Surname  |             |   |
| Inventor's<br>Signature  |  |  | Date   |             |   |
| Residence: City  |  | State  | Country  | Citizenship |   |
| Mailing Address  |  |  |  |             |   |
| City   |  | State  | Zip  | Country     |   |
| <input type="checkbox"/> Additional inventors are being named on the _____ supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.  |  |  |  |             |   |

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NAME OF SOLE OR FIRST INVENTOR:

☐ A petition has been filed for this unsigned inventorGiven Name Matthew  
(first and middle [if any])Family Name Kroeze  
or SurnameInventor's  
Signature*Matthew Kroeze*

Date

7/9/02

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NAME OF SECOND INVENTOR:

☐ A petition has been filed for this unsigned inventorGiven Name  
(first and middle [if any])Family Name  
or SurnameInventor's  
Signature

Date

Residence: City

State

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Citizenship

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☐ Additional inventors are being named on the \_\_\_\_\_ supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.

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PTO/SB/81 (02-01)

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|------------------------|----------------|
| Application Number     | 10/063,476     |
| Filing Date            | 26 April 2002  |
| First Named Inventor   | Matthew Kroeze |
| Group Art Unit         | 3727           |
| Examiner Name          |                |
| Attorney Docket Number | 2036-003-03    |

I hereby appoint:

☒ Practitioners at Customer Number 000996 →

OR

☐ Practitioner(s) named below:

| Name | Registration Number |
|------|---------------------|
|      |                     |
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I am the:

☒ Applicant/Inventor.

☐ Assignee of record of the entire interest. See 37 CFR 3.71.

Certificate under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

**SIGNATURE of Applicant or Assignee of Record**

|           |                       |
|-----------|-----------------------|
| Name      | Matthew Kroeze        |
| Signature | <i>Matthew Kroeze</i> |
| Date      | 7/9/02                |

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below\*.

☐ \*Total of \_\_\_\_\_ forms are submitted.

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